Image# 14978245054 PAGE 1 / 32

### FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

									Office U	se Only	
1.	NAME OF COMMITTEE (in		TYPE OR P	PRINT ▼		mple: If typing the lines.	ng, type	12FE4	:M5		
В	lack Conserv	atives Fu	ınd								1
Ш											
AD∣	DRESS (number a	nd street)	PO Box 1	491							
ř	Check if dif										
	than previous reported. (A	rcc)	Annanda	le				VA	22003	3	
2.	FEC IDENTIFIC	CATION NUI	MBER ▼		CITY 🛦		5	STATE 🛦		ZIP COI	DE 🛦
	C C005605	99		3	B. IS THIS REPORT	\ \ \	NEW N) <b>OR</b>		AMENDED (A)		
4.	TYPE OF RE (Choose One)	PORT	(b) Mon	ort	Feb 20 (M2)		May 20 (M5)		Aug 20 (M8)		Nov 20 (M11) (Non-Election Year Only)
	(a) Quarterly Re	eports:	Due	On:	Mar 20 (M3)		Jun 20 (M6)		Sep 20 (M9)		Dec 20 (M12) (Non-Election Year Only)
	April 15	:			Apr 20 (M4)		Jul 20 (M7)		Oct 20 (M10)		Jan 31 (YE)
		ly Report (Q1	) (c)	12-Day	П	Primary (12F	P)	Gen	eral (12G)	П	Runoff (12R)
	July 15 Quarter	ly Report (Q2	2)	PRE-Election Report for th		Convention (	-	1	cial (12S)		
	X October Quarter	r 15 ly Report (Q3	3)	Tioport for th	o	Convention	120)	Орос	nai (120)		
	January			El	ection on	M M /	D D /	Y Y Y Y	_ Y	in the State of	f
	Report	Mid-Year (Non-election nly) (MY)	(d)	30-Day POST-Election		General (300	G)	Rund	off (30R)		Special (30S)
	Termina (TER)	ation Report		Report for th	e:	M = M /	D D /	Y = Y = Y	Y	in the	
	(IER)			El	ection on					State of	f
5.	Covering Period	07	/ D 1	20	14	through	09	30	20	14	
l ce	ertify that I have e	examined this	Report a	nd to the bes	st of my kno	wledge and	belief it is tru	e, correc	and comple	te.	
	I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  Type or Print Name of Treasurer  Patrick Krason										
Sia	nature of Treasure	er <i>Patrick</i>	k Krason			[Electronicall	y Filed] D	ate	10 / 15	D /	2014
J											
NO <sup>.</sup>	TE: Submission of	false, erroned	ous, or inco	mplete inform	nation may su	bject the per	son signing th	is Report	to the penalti	es of 2 L	J.S.C. §437g.
	Office Use									FOR Rev. 12/20	
	_ Only						1		1 '		

### SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Black Conservatives Fund 07 2014 09 30 2014 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 0.00 January 1, 2014 (b) Cash on Hand at 3508.77 Beginning of Reporting Period..... 167000.89 82046.64 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 85555.41 167000.89 6(a) and 6(c) for Column B)..... 59349.02 140794.50 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 26206.39 26206.39 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100

### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Disale	O		
віаск	Conse	rvatives	: Funa

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees	4440.00	30351.14
(i) Itemized (use Schedule A)	4110.00	30331.14
/** II ::	77000.04	136649.75
(ii) Unitemized	77936.64	130049.73
(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	82046.64	167000.89
Lines Tr(a)(i) and (ii)	, 020-0.04	7 10 000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees		
(such as PACs)	0.00	0.00
(d) Total Contributions (add Lines	, , , , , , , , , , , , , , , , , , , ,	
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)▶	82046.64	167000.89
. Transfers From Affiliated/Other		
Party Committees	0.00	0.00
. All Loans Received	0.00	0.00
. Loan Repayments Received	0.00	0.00
. Offsets To Operating Expenditures	7	7
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
. Refunds of Contributions Made		
to Federal Candidates and Other		
Political Committees	0.00	0.00
Other Federal Receipts		
(Dividends, Interest, etc.)	0.00	0.00
. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account	0.00	0.00
(from Schedule H3)	0.00	0.00
(1) 1	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
(c) Total Transiers (add To(a) and To(b))	3.00	0.00
. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶	82046.64	167000.89
. Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	82046.64	167000.89

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disb	ursements	COLUMN B Calendar Year-to-Date		
21. Operating Expend (a) Allocated Fed	itures: ——	Total This Period	Calcillati i Cal-to-Date	
	Schedule H4)			
	Share	0.00	0.00	
(**) N = 1		0.00	0.00	
	eral Share	0.00	0.00	
	Operating	7074.02	39031.52	
•	ng Expenditures	7		
	(a)(ii), and (b))▶	7074.02	39031.52	
2. Transfers to Affilia	ted/Other Party			
Committees  3. Contributions to	·····	0.00	0.00	
Federal Candidate and Other Politica	I Committees	1000.00	7700.00	
. Independent Expe		51275 00	94062 98	
<ol><li>Coordinated Party</li></ol>	Expenditures	51275.00	94062.98	
(2 U.S.C. §441a(d	))	0.00	0.00	
(uoo conocalo i ).				
. Loan Repayments	Made	0.00	0.00	
'. Loans Made	<u>.</u>	0.00	0.00	
<ol> <li>Refunds of Contril (a) Individuals/Pe</li> </ol>	outions To:			
Than Political	Committees	0.00	0.00	
			200	
	Committees	0.00	0.00	
(c) Other Politica	S)	0.00	0.00	
(Such as FAC	(5)	0.00		
(d) Total Contribu	ition Refunds			
(add Lines 28	8(a), (b), and (c))▶	0.00	0.00	
Other Disburseme	nts	0.00	0.00	
Federal Flection A	activity (2 U.S.C. §431(20))			
	leral Election Activity			
(from Schedu				
	nare	0.00	0.00	
	_		0.00	
` '	are	0.00	0.00	
	on Activity Paid Entirely	0.00	0.00	
	eral Funds Election Activity (add	0.00		
	), 30(a)(ii) and 30(b))▶	0.00	0.00	
()(				
. Total Disbursemer	its (add Lines 21(c), 22,			
23, 24, 25, 26, 27	, 28(d), 29 and 30(c))	59349.02	140794.50	
. Total Federal Disb				
	a)(ii) and Line 30(a)(ii)	59349.02	140794.50	
HUIH LINE 31)	······································	33043.02	1407 94.30	

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	82046.64	167000.89
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	82046.64	167000.89
i. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	7074.02	39031.52
. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
Net Operating Expenditures     (subtract Line 37 from Line 36)	7074.02	39031.52

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

FOR LINE NUMBER:				PAGE	-	6	OF	32	
(check only one)									
X	11a		11b		11c		12	2	
	13		14		15		16	6	17

		<u> </u>					
	Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.						
$\setminus$	NAME OF COMMITTEE (In Full) Black Conservatives Fund						
Α.	Full Name (Last, First, Middle Initial) Eugene Carr  Mailing Address 875 18th Ave S  City Naples	State Zip Code FL 34102	Date of Receipt  09 24 2014  Transaction ID: SA11AI.10621  Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.  Name of Employer  Receipt For: 2014  Primary General  Other (specify)	Occupation  Aggregate Year-to-Date ▼  300.00	300.00 Contribution				
В.	Full Name (Last, First, Middle Initial)  JUDY CAUGHLIN  Mailing Address 2105 SHADOW RIDGE DR  City	State Zip Code	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
	ARLINGTON  FEC ID number of contributing federal political committee.  Name of Employer Self	TX 76006  C Occupation Accountant	Transaction ID: SA11AI.12183  Amount of Each Receipt this Period  0.00  Contribution				
	Receipt For: 2014  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  280.00					
c.	Full Name (Last, First, Middle Initial)  JUDY CAUGHLIN  Mailing Address 2105 SHADOW RIDGE DR  City  ARLINGTON  FEC ID number of contributing federal political committee.  Name of Employer  Self  Receipt For: 2014  Primary General  Other (specify)	State Zip Code TX 76006  C  Occupation Accountant  Aggregate Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
S	UBTOTAL of Receipts This Page (optional)	<u> </u>	300.00				
Т	OTAL This Period (last page this line number of	nly)					

## SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 7 OF Use separate schedule(s) (check only one)

32

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X   11a
Any information copied from such Reports and Statement or for commercial purposes, other than using the name a		
NAME OF COMMITTEE (In Full)  Black Conservatives Fund		
Primary ☐ General  Other (specify) ▼	77345 ation	Date of Receipt  07 01 2014  Transaction ID: SA11AI.11174  Amount of Each Receipt this Period  0.00  Contribution
Full Name (Last, First, Middle Initial)  Ellis Courte  Mailing Address 1719 Lofty Maple Trail  City State Kingwood TX  FEC ID number of contributing federal political committee.  Name of Employer Retired  Receipt For: 2014 Primary General Other (specify)	77345 ation	Date of Receipt  08 20 2014  Transaction ID: SA11AI.11648  Amount of Each Receipt this Period  0.00  Contribution
Pagaint For: 2044	46032	Date of Receipt  M M / 25 2014  Transaction ID : SA11Al.8888  Amount of Each Receipt this Period  Contribution
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	35.00

### SCHEDULE A (FEC Form 3X) 17

FOR LINE NUMBER: PAGE 8 OF

IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check o	nly or	ne) ] <sub>11b</sub>	11c	12	2	
			Detailed Summary Page	13		14	15	16		17
	y information copied from such Reports and for commercial purposes, other than using the									; 
$\rangle$	NAME OF COMMITTEE (In Full) Black Conservatives Fund									
Α.	Full Name (Last, First, Middle Initial) robin ely			Date	of Re	eceipt				
	Mailing Address po box 115			08		26	/ Y	2014		
	City star tannery	State VA	Zip Code 22654			ion ID :			iod	
	FEC ID number of contributing federal political committee.	C				,	7	2	225.00	
	Name of Employer Self	Occupation Physician R		Contrib	oution	l				
	Receipt For: 2014  Primary ☐ General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 525.00							
В.	Full Name (Last, First, Middle Initial) James Flynn			Date	of Re	eceipt				
	Mailing Address 1016 SW Myrtle Dr.			09		08	/ Y	2014		
	City Portland	State OR	Zip Code 97201			ion ID : S Each R			iod	
	FEC ID number of contributing federal political committee.	С				7			0.00	
	Name of Employer New & Neville Real Estate	Occupation Real Estate		Contrib	oution					
	Receipt For: 2014  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00							
— С.	Full Name (Last, First, Middle Initial)  James Flynn			Date	of Re	eceipt				
	Mailing Address 1016 SW Myrtle Dr.			09	M /	23	/ Y	2014		
	City Portland	State OR	Zip Code 97201			ion ID : Each R				
	FEC ID number of contributing federal political committee.	С		Contril	a. sti a s	7	- 7		0.00	
	Name of Employer	Occupation		Contril	Contribution					
	New & Neville Real Estate	Real Estate	Broker							
	Receipt For: 2014  Primary ☐ General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00							
H	UBTOTAL of Receipts This Page (optional)  OTAL This Period (last page this line numbe		<u> </u>	F	÷	7		2	25.00	=

	FOR LINE NUMBER: PAGE 9 OF	32
Use separate schedule(s) for each category of the	(check only one)	
Detailed Summary Page	X 11a 11b 11c 12	

	Statements may not be sold or used by any persthe name and address of any political committee to	
NAME OF COMMITTEE (In Full) Black Conservatives Fund		
Full Name (Last, First, Middle Initial)  Victoria Ford  Mailing Address 4303 Forest Park Rd  City  Jacksonville  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For: 2014  Primary General  Other (specify)	State Zip Code FL 32210  C  Occupation Retired  Aggregate Year-to-Date ▼  250.00	Date of Receipt  07 07 2014  Transaction ID: SA11AI.7447  Amount of Each Receipt this Period  250.00  Contribution
Full Name (Last, First, Middle Initial)  Robert Hatch  Mailing Address 601 W 55th St  City  Kansas City  FEC ID number of contributing federal political committee.  Name of Employer  Cereal Ingredients  Receipt For: 2014  Primary  Other (specify)	State Zip Code MO 64113  C  Occupation CEO  Aggregate Year-to-Date ▼  500.00	Date of Receipt  07 02 2014  Transaction ID: SA11AI.7255  Amount of Each Receipt this Period  500.00  Contribution
Full Name (Last, First, Middle Initial)  Robert Hatch  Mailing Address 601 W 55th St  City Kansas City  FEC ID number of contributing federal political committee.  Name of Employer Cereal Ingredients Receipt For: 2014  Primary Other (specify)	State Zip Code MO 64113  C  Occupation CEO  Aggregate Year-to-Date ▼  1000.00	Date of Receipt  08
SUBTOTAL of Receipts This Page (optional).	•	1250.00
TOTAL This Period (last page this line number	er only)	

## SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 10 OF 32

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one)    X   11a
Any information copied from such Reports and Statements or for commercial purposes, other than using the name an		
NAME OF COMMITTEE (In Full)  Black Conservatives Fund		
Full Name (Last, First, Middle Initial)  Herman Kanis  Mailing Address 3131 Lakeshore Ave.N.  City State Holland MI  FEC ID number of contributing federal political committee.  Name of Employer Retired Receipt For: 2014  Primary General Other (specify)   Occupate Retired  Aggregate  Aggregate  Other (specify)	Zip Code 49424 tion ate Year-to-Date ▼	Date of Receipt    M
Full Name (Last, First, Middle Initial)  Bernard Koether  Mailing Address 757 SE 17th St  City State Fort Lauderdale FL  FEC ID number of contributing federal political committee.  Name of Employer retired  Receipt For: 2014  Primary General Other (specify)   General	Zip Code 33316 tion  ate Year-to-Date ▼  300.00	Date of Receipt  99 25 2014  Transaction ID : SA11AI.10969  Amount of Each Receipt this Period  100.00  Contribution
Full Name (Last, First, Middle Initial)  Ruth Mark  Mailing Address 1811 Woodgate Drive  City State Goshen IN  FEC ID number of contributing federal political committee.  Name of Employer Occupate retired  Receipt For: 2014  Primary General Other (specify)   Occupate retired  Aggregate  Aggregate  Other (specify)	Zip Code 46526 tion ate Year-to-Date ▼	Date of Receipt  09 23 2014  Transaction ID: SA11AI.13957  Amount of Each Receipt this Period  0.00  Contribution
SUBTOTAL of Receipts This Page (optional)	•	200.00
TOTAL This Period (last page this line number only)		

FOR LINE NUMBER: PAGE 11 OF 32 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Black Conservatives Fund Full Name (Last, First, Middle Initial) MARLE MARKS Date of Receipt Mailing Address PO BOX 1860 2014 06 City Zip Code State Transaction ID: SA11AI.12757 CA **DAVIS** 95617 Amount of Each Receipt this Period FEC ID number of contributing C 0.00 federal political committee. Contribution Name of Employer Occupation RETIRED RETIRED Receipt For: 2014 Aggregate Year-to-Date ▼ **General** Primary 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Eleanor McInnis Date of Receipt Mailing Address 3408 W. Lykes Ave. 14 07 2014 City State Zip Code Transaction ID: SA11AI.11400 FL Tampa 33609 Amount of Each Receipt this Period FEC ID number of contributing C 0.00 federal political committee. Contribution Name of Employer Occupation Na Homemaker Receipt For: 2014 Aggregate Year-to-Date ▼ X General Primary 410.00 Other (specify) Full Name (Last, First, Middle Initial) c. Eleanor McInnis Date of Receipt Mailing Address 3408 W. Lykes Ave. M = M 26 80 2014 Zip Code City State Transaction ID: SA11AI.12201 FL Tampa 33609 Amount of Each Receipt this Period FEC ID number of contributing 0.00 С federal political committee. Contribution Name of Employer Occupation Na Homemaker Receipt For: 2014 Aggregate Year-to-Date ▼ Primary General Other (specify) 410.00 0.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 12 OF 32 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Black Conservatives Fund Full Name (Last, First, Middle Initial) Thomas Morse Date of Receipt Mailing Address 1628 Jacobsen Road 2014 City Zip Code State Transaction ID: SA11AI.10903 WI Neenah 54956 Amount of Each Receipt this Period FEC ID number of contributing C 200.00 federal political committee. Contribution Name of Employer Occupation Ashland Inc. Applications Manager Receipt For: 2014 Aggregate Year-to-Date ▼ **General** Primary 220.00 Other (specify) Full Name (Last, First, Middle Initial) B. Sara B Neal Date of Receipt Mailing Address PO Box 1167 08 2014 11 City State Zip Code Transaction ID: SA11AI.8580 ΑL Montrose 36559 Amount of Each Receipt this Period FEC ID number of contributing C 200.00 federal political committee. Contribution Name of Employer Occupation Receipt For: 2014 Aggregate Year-to-Date ▼ X General Primary 400.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Richard Odom Date of Receipt Mailing Address 2333 Stafford Rd M M / 80 26 2014 City State Zip Code Transaction ID: SA11AI.8994 CA **Thousand Oaks** 91361 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Contribution Name of Employer Occupation retired retired Receipt For: 2014 Aggregate Year-to-Date ▼ Primary General Other (specify) 210.00 500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

## SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: (check only one) PAGE 13 OF Use separate schedule(s)

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X   11a
Any information copied from such Reports and Stater or for commercial purposes, other than using the nar		
NAME OF COMMITTEE (In Full)  Black Conservatives Fund		
Northbrook  FEC ID number of contributing federal political committee.  Name of Employer  Self Employed  Second Form 2014	State Zip Code IL 60062  C  ccupation elf Employed ggregate Year-to-Date ▼	Date of Receipt  9 25 2014  Transaction ID: SA11AI.10973  Amount of Each Receipt this Period  100.00  Contribution
Meridian  FEC ID number of contributing federal political committee.  Name of Employer Retired Dr	State Zip Code ID 83642  C ccupation iver ggregate Year-to-Date ▼  440.00	Date of Receipt  99 26 2014  Transaction ID: SA11AI.14373  Amount of Each Receipt this Period  0.00  Contribution
Weatherford  FEC ID number of contributing federal political committee.  Name of Employer  Oct.	State Zip Code TX 76086  C ccupation  ggregate Year-to-Date ▼	Date of Receipt  08 25 2014  Transaction ID : SA11AI.9061  Amount of Each Receipt this Period  500.00  Contribution
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	600.00
TOTAL This Period (last page this line number only	)	

FOR LINE NUMBER: PAGE 14 OF 32 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Black Conservatives Fund Full Name (Last, First, Middle Initial) Bob Rocco Date of Receipt Mailing Address 118 Ennis Lane 2014 28 City Zip Code State Transaction ID: SA11AI.14431 FL Jupiter 33458 Amount of Each Receipt this Period FEC ID number of contributing C 0.00 federal political committee. Contribution Name of Employer Occupation Retired Retired Receipt For: 2014 Aggregate Year-to-Date ▼ Primary X General 220.00 Other (specify) Full Name (Last, First, Middle Initial) B. Edward Smith Date of Receipt Mailing Address 6109 Stonehaven Dr 30 07 2014 City State Zip Code Transaction ID: SA11AI.11488 Nashville TN 37215 Amount of Each Receipt this Period FEC ID number of contributing C 0.00 federal political committee. Contribution Name of Employer Occupation Retired Retired Receipt For: 2014 Aggregate Year-to-Date ▼ X General Primary 255.00 Other (specify) Full Name (Last, First, Middle Initial) c. Edward Smith Date of Receipt Mailing Address 6109 Stonehaven Dr M M / 80 09 2014 City Zip Code State Transaction ID: SA11AI.12783 TN Nashville 37215 Amount of Each Receipt this Period FEC ID number of contributing C 0.00 federal political committee. Contribution Name of Employer Occupation Retired Retired Receipt For: 2014 Aggregate Year-to-Date ▼ Primary General Other (specify) 255.00 0.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 15 OF 32 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Black Conservatives Fund Full Name (Last, First, Middle Initial) **Edward Smith** Date of Receipt Mailing Address 6109 Stonehaven Dr 2014 City Zip Code State Transaction ID: SA11AI.14023 TN Nashville 37215 Amount of Each Receipt this Period FEC ID number of contributing C 0.00 federal political committee. Contribution Name of Employer Occupation Retired Retired Receipt For: 2014 Aggregate Year-to-Date ▼ Primary X General 255.00 Other (specify) Full Name (Last, First, Middle Initial) B. Edward Smith Date of Receipt Mailing Address 6109 Stonehaven Dr 09 25 2014 City State Zip Code Transaction ID: SA11AI.14267 Nashville TN 37215 Amount of Each Receipt this Period FEC ID number of contributing C 0.00 federal political committee. Contribution Name of Employer Occupation Retired Retired Receipt For: 2014 Aggregate Year-to-Date ▼ X General Primary 255.00 Other (specify) Full Name (Last, First, Middle Initial) c. Edward Smith Date of Receipt Mailing Address 6109 Stonehaven Dr M M / 09 29 2014 City Zip Code State Transaction ID: SA11AI.14457 TN Nashville 37215 Amount of Each Receipt this Period FEC ID number of contributing C 0.00 federal political committee. Contribution Name of Employer Occupation Retired Retired Receipt For: 2014 Aggregate Year-to-Date ▼ Primary General Other (specify) 255.00 0.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 16 OF 32 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Black Conservatives Fund Full Name (Last, First, Middle Initial) Arlyn Wadholm Date of Receipt Mailing Address 8951 32nd St NW 08 2014 26 City Zip Code State Transaction ID: SA11AI.9007 ND New Town 58763 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Contribution Name of Employer Occupation Retired Retired Receipt For: 2014 Aggregate Year-to-Date ▼ Primary X General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Arlyn Wadholm Date of Receipt Mailing Address 8951 32nd St NW 09 25 2014 City State Zip Code Transaction ID: SA11AI.11004 ND New Town 58763 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Contribution Name of Employer Occupation Retired Retired Receipt For: 2014 Aggregate Year-to-Date ▼ X General Primary 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Walter Wild Date of Receipt Mailing Address 41-473 Kalanianaole Hwy. M = M 20 80 2014 Zip Code City State Transaction ID: SA11AI.11689 HI Waimanalo 96795 Amount of Each Receipt this Period FEC ID number of contributing 0.00 С federal political committee. Contribution Name of Employer Occupation None Retired Psychologist Receipt For: 2014 Aggregate Year-to-Date ▼ Primary General Other (specify) 635.14 1000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

	FOF	R LINE	NU	MBER	:	PAGE	 17 OI	F	32
Use separate schedule(s)	(che	ck only	or	ne)					
for each category of the Detailed Summary Page	X	11a		11b		11c	12		
_ come common , age		13		14		15	16		117

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Black Conservatives Fund Full Name (Last, First, Middle Initial) Walter Wild Date of Receipt Mailing Address 41-473 Kalanianaole Hwy. 08 2014 22 City Zip Code State Transaction ID: SA11AI.11784 Waimanalo HI 96795 Amount of Each Receipt this Period FEC ID number of contributing C 0.00 federal political committee. Contribution Name of Employer Occupation None Retired Psychologist Receipt For: 2014 Aggregate Year-to-Date ▼ Primary X General 635.14 Other (specify) Full Name (Last, First, Middle Initial) B. Walter Wild Date of Receipt Mailing Address 41-473 Kalanianaole Hwy. 08 25 2014 City State Zip Code Transaction ID: SA11AI.12061 HI Waimanalo 96795 Amount of Each Receipt this Period FEC ID number of contributing C 0.00 federal political committee. Contribution Name of Employer Occupation None Retired Psychologist Receipt For: 2014 Aggregate Year-to-Date ▼ X General Primary 635.14 Other (specify)

Full Name (Last, First, Middle Initial) c. Walter Wild Date of Receipt Mailing Address 41-473 Kalanianaole Hwy. M = M 03 09 2014 Zip Code City State Transaction ID: SA11AI.12603 HI Waimanalo 96795 Amount of Each Receipt this Period FEC ID number of contributing 0.00 С federal political committee. Contribution Name of Employer Occupation None Retired Psychologist Receipt For: 2014 Aggregate Year-to-Date ▼ Primary General

635.14

0.00

Other (specify)

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

## SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 18 OF Use separate schedule(s)

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X   11a
Any information copied from such Reports and Statements or for commercial purposes, other than using the name an		
NAME OF COMMITTEE (In Full)  Black Conservatives Fund		
Receipt For: 2014  Primary	Zip Code 96795 tion Psychologist ate Year-to-Date ▼	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Descipt Formand	Zip Code 96795 tion Psychologist ate Year-to-Date ▼	Date of Receipt  9 08 2014  Transaction ID: SA11AI.12796  Amount of Each Receipt this Period  0.00  Contribution
Possint For: 2044	Zip Code 96795 tion Psychologist ate Year-to-Date ▼  635.14	Date of Receipt  09 10 2014  Transaction ID : SA11AI.13044  Amount of Each Receipt this Period  0.00  Contribution
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	0.00

	FOR LINE	NUMBER	:   PAGE	E 19 OI	F 3			
Use separate schedule(s)	(check only one)							
for each category of the Detailed Summary Page	X 11a	11b	11c	12				
	13	14	15	16				

		10 11 10 10
	d Statements may not be sold or used by any per the name and address of any political committee	
NAME OF COMMITTEE (In Full) Black Conservatives Fund		
Full Name (Last, First, Middle Initial)  Walter Wild  Mailing Address 41-473 Kalanianaole Hwy.  City Waimanalo  FEC ID number of contributing federal political committee.  Name of Employer  None  Receipt For: 2014  Primary General  Other (specify)	State Zip Code HI 96795  C  Occupation Retired Psychologist  Aggregate Year-to-Date ▼  635.14	Date of Receipt  109 16 2014  Transaction ID: SA11AI.13493  Amount of Each Receipt this Period  0.00  Contribution
Full Name (Last, First, Middle Initial)  Walter Wild  Mailing Address 41-473 Kalanianaole Hwy.  City  Waimanalo  FEC ID number of contributing federal political committee.  Name of Employer  None  Receipt For: 2014  Primary  Other (specify)   General  Other (specify)	State Zip Code HI 96795  C  Occupation Retired Psychologist  Aggregate Year-to-Date ▼  635.14	Date of Receipt    09
Full Name (Last, First, Middle Initial)  Walter Wild  Mailing Address 41-473 Kalanianaole Hwy.  City Waimanalo  FEC ID number of contributing federal political committee.  Name of Employer  None  Receipt For: 2014  Primary  Other (specify)   General	State Zip Code HI 96795  C  Occupation Retired Psychologist  Aggregate Year-to-Date ▼  635.14	Date of Receipt    M
SUBTOTAL of Receipts This Page (optional)	<u> </u>	0.00
TOTAL This Period (last page this line numb	er only)	4110.00

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 20 OF			
ITEMIZED DISBURSEMENTS	for each category of the	(check only 21b	one) 22 23 2	24 25 26	
	Detailed Summary Page	27	28a 28b	28c 29 30b	
Any information copied from such Reports and State or for commercial purposes, other than using the nar					
NAME OF COMMITTEE (In Full)  Black Conservatives Fund					
/ Full Name (Last, First, Middle Initial)					
A. Active Engagement			Date of Disbursem		
Mailing Address 44084 Riverside Pkwy			07 01	2014	
City	State Zip Code		Transaction ID .	SD24D 4460E	
Lansdowne	VA 20176		Transaction ID:	3B21B.14003	
Purpose of Disbursement Copy writing			Amount of Each D	isbursement this Period	
Candidate Name		Category/		1000.00	
Black Conservatives Fund		Туре		1000.00	
Senate President	ment For: 2014  Primary General  Other (specify)				
Full Name (Last, First, Middle Initial)  B. Active Engagement			Date of Disbursem	_	
Mailing Address 44084 Riverside Pkwy			07 01	2014	
Lansdowne	State Zip Code VA 20176		Transaction ID :	SB21B.14606	
Purpose of Disbursement Copywriting			Amount of Each D	isbursement this Period	
Candidate Name Black Conservatives Fund		Category/		975.00	
	ment For: 2014	Туре			
Senate President State: District:	Primary General Other (specify)				
Full Name (Last, First, Middle Initial)					
C. Active Engagement			Date of Disbursem	_	
Mailing Address 44084 Riverside Pkwy		07 09	2014		
City Lansdowne	State Zip Code VA 20176		Transaction ID :	SB21B.14607	
Purpose of Disbursement Copywriting	20110		Amount of Foot D	isbursement this Period	
Candidate Name	andidate Name		Amount of Each D	isbursement this Period	
Black Conservatives Fund		Category/ Type		1000.00	
Office Sought:  House  Senate  President  State:  Disburse	ment For: 2014 Primary General Other (specify)				
Ziolioli Ziolioli					
SUBTOTAL of Disbursements This Page (optional)		······•		2975.00	
TOTAL This Period (last page this line number only	)			7	

SCHEDULE B (FEC Form 3X)	Use separate so	chedule(s)	FOR LINE I			PAGE	21 OF	= 32
TEMIZED DISBURSEMENTS	for each categor Detailed Summa	ry of the	21b	22 28a	23 28b	24 28c	25 29	30
Any information copied from such Reports and States or for commercial purposes, other than using the nar								
NAME OF COMMITTEE (In Full)  Black Conservatives Fund		) h =						
Full Name (Last, First, Middle Initial)								
A. Active Engagement					isburseme			
Mailing Address 44084 Riverside Pkwy				07	14		2014	
City	State Zip C	ode		Transac	tion ID : S	R21R 146	:08	
Lansdowne	VA 2017	6		Transac	. 3	D21D.140	00	
Purpose of Disbursement Admin fees		- 1		Amount o	f Each Dis	bursemer	nt this Pe	eriod
Candidate Name			Category/				246.0	00
Black Conservatives Fund			Туре		7	- 7	346.0	JU
Senate President	ment For: 2014  Primary  Other (specify)	General ,						
State: District:								
Full Name (Last, First, Middle Initial)  3. Active Engagement					isburseme			
Mailing Address 44084 Riverside Pkwy				08	08		2014	
,	State Zip C			Transac	tion ID : S	B21B.146	609	
Lansdowne Purpose of Disbursement	VA 2017	6						
Admin fees				Amount o	f Each Dis	bursemer	nt this Pe	eriod
Candidate Name			Category/				4540	-0
Black Conservatives Fund			Type		7	-	1512.5	00
Office Sought:  House Senate President State:  Disburse	ment For: 2014 Primary Other (specify)	General ,						
Full Name (Last, First, Middle Initial)  Patrick Krason					isburseme			
Mailing Address PO Box 1491			09	22		2014		
City	State Zip C	ode		Transsa	tion ID : S	D21D 444	26	
Annandale	VA 2200		_	iransac	ניטו ווט : S	D∠1B.14t	020	
Purpose of Disbursement FEC Compliance Consulting				Amount o	f Each Dis	bursemer	nt this Pe	eriod
Candidate Name			Category/				-	
Black Conservatives Fund			Type		7	-,	500.0	JU
Senate President	ment For: 2014 Primary Other (specify)	General ,						
State: District:								
SUBTOTAL of Disbursements This Page (optional)			·····•		,	-,-	2358.5	60
TOTAL This Period (last page this line number only	)				4	40.	40	

CHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE		OF 32		
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one) 22 23 24 25 28a 28b 28c 29	30		
Any information copied from such Reports and State or for commercial purposes, other than using the na						
NAME OF COMMITTEE (In Full)  Black Conservatives Fund	, , , , , , , , , , , , , , , , , , ,					
Full Name (Last, First, Middle Initial)			D (D) .			
· Patrick Krason			Date of Disbursement	V		
Mailing Address PO Box 1491			09 29 2014			
City Annandale	State Zip Code VA 22003		Transaction ID : SB21B.14627			
Purpose of Disbursement Reimbursement for PO Box Payment	22335		Amount of Each Disbursement this F	Period		
Candidate Name		Category/	Amount of Each Disbursement this 1			
Black Conservatives Fund Office Sought: House Disburse	ement For: 2014	Туре	, ,			
Senate President	Primary ☐ General  Other (specify) ▼					
State: District:  Full Name (Last, First, Middle Initial)						
· Ritz Carlton			Date of Disbursement			
Mailing Address			09 23 2014	Y		
City Atlanta	State Zip Code GA		Transaction ID : SB21B.14624			
Purpose of Disbursement Travel			Amount of Each Disbursement this F	Period		
Candidate Name		Category/	706	6.92		
Black Conservatives Fund	was to the same same	Type	790	).3Z		
Office Sought: House Disburse Senate President State: District:	ement For: 2014  Primary					
Full Name (Last, First, Middle Initial) - US Airways			Date of Disbursement			
Mailing Address		09 18 2014	Y			
City Phoneix	State Zip Code AZ		Transaction ID : SB21B.14616			
Purpose of Disbursement Travel		Amount of Each Disbursement this F	Period			
Candidate Name Black Conservatives Fund		Category/ Type	565	5.00		
Senate	ement For: 2014  Primary General  Other (specify)	71				
State: District:	, , , , ,					

Any information copied from such Reports and Statem or for commercial purposes, other than using the nam  NAME OF COMMITTEE (In Full)  Black Conservatives Fund  Full Name (Last, First, Middle Initial)  A. US Airways			22 23 28a 28 on for the purpos solicit contribution  Date of Disbu	28c 29 30b se of soliciting contributions ons from such committee.
or for commercial purposes, other than using the nam  NAME OF COMMITTEE (In Full)  Black Conservatives Fund  Full Name (Last, First, Middle Initial)	e and address of any political		Date of Disbu	ons from such committee.
NAME OF COMMITTEE (In Full)  Black Conservatives Fund  Full Name (Last, First, Middle Initial)	State Zip Code	a. Sommittee to	Date of Disbu	rsement
	•		M = M /	
A. US Airways	•		M = M /	
	•			
Mailing Address	•		Uð	18 2014
	Δ/		Transaction	ID : SB21B.14618
Phoneix Purpose of Disbursement	ne			
Travel			Amount of Ea	ch Disbursement this Period
Candidate Name		Category/		
Black Conservatives Fund		Type		29.00
Senate	nent For: 2014  Primary			
Full Name (Last, First, Middle Initial)				
B. US Airways			Date of Disbu	rsement
Mailing Address				
•	State Zip Code AZ		Transaction	ID : SB21B.14619
Travel  Candidate Name			Amount of Ea	ch Disbursement this Period
Black Conservatives Fund		Category/ Type		49.00
Office Sought: House Disbursem	nent For: 2014  Primary General  Other (specify)	туре		
Full Name (Last, First, Middle Initial)			_	
C. US Airways			Date of Disbu	
Mailing Address			09	22 / 2014
Phoneix	State Zip Code AZ		Transaction	ID : SB21B.14623
Purpose of Disbursement Travel				
Candidate Name Black Conservatives Fund	I	Category/ Type	Amount of Ea	ch Disbursement this Period 25.00
Office Sought: House Disbursem Senate President	nent For: 2014  Primary General  Other (specify)	.,,,,,	7	
State: District:				
SUBTOTAL of Disbursements This Page (optional)  TOTAL This Period (last page this line number only).				103.00 6890.18

SCHEDULE B (FEC Form 3X)	Hoo concrete calcadula (-)	FOR LINE NUMBER: PAGE 24				
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	,			
	Detailed Summary Page	21b 27	22 X 23 28a 28b	24 25 26 28c 29 30		
Any information copied from such Reports and Staten or for commercial purposes, other than using the name						
NAME OF COMMITTEE (In Full)	ie and address of any politic	ai committee to	SOlicit Contributions	s nom such committee.		
Black Conservatives Fund						
/		-				
Full Name (Last, First, Middle Initial)  A. TIM SCOTT FOR SENATE			Date of Disburse	ement		
- HW SCOTT FOR SENATE			M M / D			
Mailing Address 1405 ASHLEY RIVER ROAD			09 3	2014		
City	State Zip Code					
CHARLESTON	SC 29407		Transaction ID	: SB23.14610		
Purpose of Disbursement Contribution			Amount of Each	Disbursement this Period		
Candidate Name		Category/				
TIM SCOTT FOR SENATE		Type		1000.00		
	nent For: 2014					
President	Primary					
State: SC District: 00	(a) (a) (b) (b) (b) (b) (b) (b) (b) (b) (b) (b					
Full Name (Last, First, Middle Initial)						
В.				ement		
Mailing Address			D / Y Y Y Y			
City	State Zip Code					
Purpose of Disbursement						
		Amount of		Amount of Each Disbursement this Period		
Candidate Name		Category/				
Office Sought: House Disbursen	nent For:	Туре		,		
Senate	Primary General					
	Other (specify) ▼					
State: District:  Full Name (Last, First, Middle Initial)						
C.			Date of Disburse	ement		
			M M / D	D / Y Y Y Y		
Mailing Address						
City	State Zip Code					
Purpose of Disbursement						
·			Amount of Each	Disbursement this Period		
Candidate Name		Category/				
Office Sought: House Disbursen	nent For:	Туре				
	Primary General					
President	Other (specify) ▼					
State: District:						
CURTOTAL of Bishamous Tris San ( iii iii				1000.00		
SUBTOTAL of Disbursements This Page (optional)		······		100.00		
TOTAL This Period (last page this line number only)				1000.00		

#### S IT

Patrick Krason

Signature

CHEDULE E (FEC Form 3X)	
EMIZED INDEPENDENT EXPENDITURES	PAGE 25 OF 32 FOR LINE 24 OF FORM 3X
IAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Black Conservatives Fund	
	C C00560599
Check if 24-hour report 48-hour report New report Amends report fill	led on M M / D D / Y Y Y Y
Full Name of Payee Active Engagement	Date of Public Distribution/Dissemination
Active Engagement	08 / 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 44084 Riverside Pkwy	Amount
City State Zip Code	1000.00
Lansdowne VA 20176	Transaction ID : SE.7184  Date of Disbursement or Obligation
Purpose of Expenditure Online Advertising  Category/ Type 004	08
Name of Federal Candidate Support Of	ffice Sought: House District: 00
WILLIAM CASSIDY Oppose	President State: LA
	sbursement For: Primary X General  114 Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
Active Engagement	08 19 2014
Mailing Address 44084 Riverside Pkwy	Amount
City State Zip Code	1000.00
Lansdowne VA 20176	Transaction ID : SE.7186  Date of Disbursement or Obligation
Purpose of Expenditure Online Advertising  Category/ Type 004	08 / 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	ffice Sought: X House District: 04
MIA LOVE    Name of Federal Candidate   Support   Of	President Senate State: UT
Calendar Year-To-Date Di	isbursement For: Primary X General
	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	2000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not with, or at the request or suggestion of, any candidate or authorized committee or agent of eit party committee) any political party committee or its agent.	•

[Electronically Filed]

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Date

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2014

### SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

	MIZED INDEPENDENT EXPENDITORES			FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full) ack Conservatives Fund			FEC IDENTIFICATION NUMBER ▼
				C C00560599
Che	ck if 24-hour report 48-hour report New report	ort Amends repo	ort filed o	n M = M / D = D / Y = Y = Y
	Full Name of Payee Active Engagement		1	Date of Public Distribution/Dissemination  08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 44084 Riverside Pkwy			Amount
	City State	Zip Code		9282.00
	Lansdowne	20176		ransaction ID : SE.7193 Date of Disbursement or Obligation
	Purpose of Expenditure Online Advertising	Category/ Type		08 / 25 / 2014
	Name of Federal Candidate	X Support	Office S	Sought: X House District: 04
-	MIA LOVE	Oppose		President Senate State: UT
	Calendar Year-To-Date Per Election for Office Sought	10282.00	Disburs 2014	ement For: Primary
	Full Name of Payee			Date of Public Distribution/Dissemination
_	Active Engagement			08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 44084 Riverside Pkwy			Amount
-	City State	Zip Code		4944.00
	Lansdowne VA	20176		ransaction ID : SE.7197 Date of Disbursement or Obligation
	Purpose of Expenditure Online Advertising	Category/ Type		08 / 26 / 2014
Ī	Name of Federal Candidate	X Support	Office S	Sought: X House District: 04
	MIA LOVE	Oppose	F	President Senate State: UT
	Calendar Year-To-Date Per Election for Office Sought	15226.00	Disburs 2014	sement For: Primary X General  Other (specify) ▶
				Other (specify)
(a	a) SUBTOTAL of Itemized Independent Expenditures		·· • [	14226.00
(k	b) SUBTOTAL of Unitemized Independent Expenditures		·· • [	
(0	c) TOTAL Independent Expenditures		·· • [	
W	Inder penalty of perjury I certify that the independent expenditures ith, or at the request or suggestion of, any candidate or authorized arty committee) any political party committee or its agent.	•		•
	Patrick Krason [Electroni	nically Filed] Date	M N	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Signature	_ Date	,	النبالنال

## SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

PAGE	27	OF	32
FOR L	INE 24	OF F	ORM 3X

		FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Black Conservatives Fund		C C00560599
Check if 24-hour report 48-hour report New rep	port Amends report filed	d on Mam / Dab / Yayayay
Full Name of Payee		Date of Public Distribution/Dissemination
Active Engagement  Mailing Address 44004 Bit partide Bloom		08 / 27 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
44084 Riverside Pkwy		Amount
City State	Zip Code	1000.00
Lansdowne VA	20176	Transaction ID : SE.7198  Date of Disbursement or Obligation
Purpose of Expenditure Copy writing	Category/ Type	08 / 26 / Y Y Y Y Y
Name of Federal Candidate	Support Offic	e Sought: X House District: 04
MIA LOVE	Oppose	President Senate State: UT
Calendar Year-To-Date Per Election for Office Sought	16226.00 Disb 2014	ursement For: Primary X General  Other (specify) ►
Full Name of Payee		Date of Public Distribution/Dissemination
Active Engagement		09 09 2014
Mailing Address 44084 Riverside Pkwy		Amount
City State	Zip Code	5100.00
Lansdowne VA	20176	Transaction ID : SE.7203  Date of Disbursement or Obligation
Purpose of Expenditure Online Advertising	Category/ Type	09 / 09 / 2014
Name of Federal Candidate	Support Office	ce Sought:
MIA LOVE	Oppose	President Senate State: UT
Calendar Year-To-Date Per Election for Office Sought	21326.00 Disb 2014	oursement For: Primary General  Other (specify)   Other
(a) SUBTOTAL of Itemized Independent Expenditures	·····	6100.00
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures	·····	
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
Patrick Krason [Electron	nically Filed] Date	10 15 2014
Signature		

Signature

## S

SCHEDULE E (FEC Form 3X)	
TEMIZED INDEPENDENT EXPENDITURES	PAGE 28 OF 32 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Black Conservatives Fund	C C00560599
Check if 24-hour report 48-hour report New report Amends report	rt filed on
Full Name of Payee Active Engagement	Date of Public Distribution/Dissemination
Mailing Address	09 11 / 2014
44084 Riverside Pkwy	Amount
City State Zip Code Lansdowne VA 20176	4182.00 Transaction ID : SE.7206
Purpose of Expenditure Online Advertising  Category/ Type	Date of Disbursement or Obligation  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support	Office Sought:  House District: 04
MIA LOVE Oppose	President Senate State: UT
Calendar Year-To-Date Per Election for Office Sought	Disbursement For:  Primary
Full Name of Payee Active Engagement	Date of Public Distribution/Dissemination  09  12  2014
Mailing Address 44084 Riverside Pkwy	Amount
City State Zip Code	1000.00
Lansdowne VA 20176	Transaction ID : SE.7209  Date of Disbursement or Obligation
Purpose of Expenditure Copy writing  Category/ Type	09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support	Office Sought:
MIA LOVE Oppose	President Senate State: UT
Calendar Year-To-Date Per Election for Office Sought 26508.00	Disbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	5182.00
(b) SUBTOTAL of Unitemized Independent Expenditures	<b>•</b>
(c) TOTAL Independent Expenditures	<b>•</b>
Under penalty of perjury I certify that the independent expenditures reported herein were with, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.	
Patrick Krason	M M / D D / Y Y Y

[Electronically Filed]

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Date

15

2014

Signature

## SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

TEMIZED INDEPENDENT EXPENDITURES	PAGE 29 OF 32 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full) Black Conservatives Fund	FEC IDENTIFICATION NUMBER ▼  C C00560599
Check if 24-hour report 48-hour report New report Amends report filed on	1 = M / D = D / Y = Y = Y
Active Engagement  Mailing Address  44084 Riverside Pkwy	of Public Distribution/Dissemination
City State Zip Code	2460.00 action ID : SE.7212
Date of Evpanditure	of Disbursement or Obligation  09 18 2014
Name of Federal Candidate  MIA LOVE  Support Office Sough Oppose Preside	ent Senate State: UT
	nt For:
Active Engagement	of Public Distribution/Dissemination  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Date	1000.00 action ID : SE.7215 of Disbursement or Obligation
Copy writing Type	09 / 22 / 2014
Name of Federal Candidate  MIA LOVE  Support  Office Sough  Preside	
Calendar Year-To-Date Per Election for Office Sought  Disbursement 29968.00  Disbursement 2014	nt For:
(a) SUBTOTAL of Itemized Independent Expenditures	3460.00
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in c with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if party committee) any political party committee or its agent.	
Patrick Krason [Electronically Filed] Date 10	15 2014

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Patrick Krason

Signature

	CHEDULE E (FEC Form 3X)		
ΓE	EMIZED INDEPENDENT EXPENDITURES		PAGE 30 OF 32 FOR LINE 24 OF FORM 3X
	AME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Е	Black Conservatives Fund		C C00560599
Cł	neck if 24-hour report 48-hour report New report Ame	ends report fi	iled on Mam / Dad / Yayayay
	Full Name of Payee Active Engagement		Date of Public Distribution/Dissemination
	Mailing Address 44084 Riverside Pkwy		09 22 2014
	Tibe Transiside Trans		Amount
	City State Zip Code		1615.00
	Lansdowne VA 20176		Transaction ID : SE.7216  Date of Disbursement or Obligation
	Purpose of Expenditure Online Advertising  Category/ Type		09 / 22 / Y Y Y Y Y
	Name of Federal Candidate	Support Of	ffice Sought: X House District:04
	MIA LOVE	Oppose [	President Senate State: UT
	Calendar Year-To-Date Per Election for Office Sought 31583.00		isbursement For:
	Full Name of Payee		Date of Public Distribution/Dissemination
	Active Engagement  Mailing Address  44004 Bivaries Bluve		09 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	44084 Riverside Pkwy		Amount
	City State Zip Code		3600.00
	Lansdowne VA 20176  Purpose of Expenditure		Transaction ID : SE.7221  Date of Disbursement or Obligation
	Online Advertising Category/ Type		09 / 23 / 2014
	Name of Federal Candidate	Support O	ffice Sought:
	MIA LOVE	Oppose	President Senate State: UT
	Calendar Year-To-Date Per Election for Office Sought 35183.00		isbursement For:  Primary  General  Other (specify) ►
		<u>'</u>	
	(a) SUBTOTAL of Itemized Independent Expenditures	·····	5215.00
	(b) SUBTOTAL of Unitemized Independent Expenditures	······	
	(c) TOTAL Independent Expenditures		
			7 7 7
	Under penalty of perjury I certify that the independent expenditures reported her with, or at the request or suggestion of, any candidate or authorized committee o party committee) any political party committee or its agent.		

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mage# 14978245084						
SCHEDULE E (FEC Form 3X) FEMIZED INDEPENDENT EXPENDITURI	ES		PAGE 31 OF 32			
NAME OF COMMITTEE (In F. II)			FOR LINE 24 OF FORM 3X			
NAME OF COMMITTEE (In Full)  Black Conservatives Fund			FEC IDENTIFICATION NUMBER ▼			
Didok Conservatives Fand			C C00560599			
Check if 24-hour report 48-hour report	New New	report Amends repo	ort filed on			
Full Name of Payee			Date of Public Distribution/Dissemination			
Active Engagement			09 / 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address 44084 Riverside Pkwy			Amount			
City	State	Zip Code	3446.00			
Lansdowne	VA	20176	Transaction ID : SE.7222  Date of Disbursement or Obligation			
Purpose of Expenditure Online Advertising		Category/ Type	09 / 23 / 2014			
Name of Federal Candidate		Support	Office Sought: House District: 04			
MIA LOVE		Oppose	President Senate State: UT			
Calendar Year-To-Date Per Election for Office Sought		38629.00	Disbursement For: Primary General 2014			
r or zioonor for omos coagin		7	Other (specify) ▶			
Full Name of Payee		, , , , , , , , , , , , , , , , , , , ,				
Full Name of Payee Active Engagement		,	Other (specify) ▶			
Full Name of Payee		,	Other (specify) ▶  Date of Public Distribution/Dissemination			
Full Name of Payee Active Engagement  Mailing Address 44084 Riverside Pkwy	State		Other (specify) ▶  Date of Public Distribution/Dissemination  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Full Name of Payee Active Engagement	State VA	Zip Code 20176	Other (specify)  Date of Public Distribution/Dissemination  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Full Name of Payee Active Engagement  Mailing Address 44084 Riverside Pkwy  City Lansdowne  Purpose of Expenditure		Zip Code	Other (specify)  Date of Public Distribution/Dissemination  09 / 25 / 2014  Amount  1046.00  Transaction ID: SE.7227  Date of Disbursement or Obligation			
Full Name of Payee Active Engagement  Mailing Address 44084 Riverside Pkwy  City Lansdowne  Purpose of Expenditure Online Advertising		Zip Code 20176	Other (specify)  Date of Public Distribution/Dissemination  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Full Name of Payee Active Engagement  Mailing Address 44084 Riverside Pkwy  City Lansdowne  Purpose of Expenditure		Zip Code 20176	Other (specify)  Date of Public Distribution/Dissemination  09 / 25 / 2014  Amount  1046.00  Transaction ID: SE.7227  Date of Disbursement or Obligation			
Full Name of Payee Active Engagement  Mailing Address 44084 Riverside Pkwy  City Lansdowne  Purpose of Expenditure Online Advertising		Zip Code 20176  Category/ Type	Other (specify)  Date of Public Distribution/Dissemination  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Full Name of Payee Active Engagement  Mailing Address 44084 Riverside Pkwy  City Lansdowne  Purpose of Expenditure Online Advertising  Name of Federal Candidate MIA LOVE  Calendar Year-To-Date		Zip Code 20176  Category/ Type  Support	Other (specify)  Date of Public Distribution/Dissemination  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Full Name of Payee Active Engagement  Mailing Address 44084 Riverside Pkwy  City Lansdowne  Purpose of Expenditure Online Advertising  Name of Federal Candidate MIA LOVE		Zip Code 20176  Category/ Type  Support Oppose	Other (specify)  Date of Public Distribution/Dissemination  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Full Name of Payee Active Engagement  Mailing Address 44084 Riverside Pkwy  City Lansdowne  Purpose of Expenditure Online Advertising  Name of Federal Candidate MIA LOVE  Calendar Year-To-Date	VA	Zip Code 20176  Category/ Type  Support Oppose 39675.00	Other (specify)  Date of Public Distribution/Dissemination  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Full Name of Payee Active Engagement  Mailing Address 44084 Riverside Pkwy  City Lansdowne  Purpose of Expenditure Online Advertising  Name of Federal Candidate MIA LOVE  Calendar Year-To-Date Per Election for Office Sought	VA itures	Zip Code 20176  Category/ Type  Support Oppose 39675.00	Other (specify)  Date of Public Distribution/Dissemination  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Full Name of Payee Active Engagement  Mailing Address 44084 Riverside Pkwy  City Lansdowne  Purpose of Expenditure Online Advertising  Name of Federal Candidate MIA LOVE  Calendar Year-To-Date Per Election for Office Sought  (a) SUBTOTAL of Itemized Independent Expenditure	ituresnditures	Zip Code 20176  Category/ Type  Support Oppose 39675.00	Other (specify)  Date of Public Distribution/Dissemination  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Patrick Krason	[Electronically Filed]	Date	10 n	15	2014
Signature					

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Patrick Krason

Signature

CHEDULE E (FEC Form 3X)				
TEMIZED INDEPENDENT EXPENDITUI	RES			PAGE 32 OF 32 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			F	FEC IDENTIFICATION NUMBER ▼
Black Conservatives Fund				C C00560599
Check if 24-hour report 48-hour report	New rep	oort Amends repo	ort filed on	M / D = D / Y = Y = Y
Full Name of Payee Active Engagement				Public Distribution/Dissemination
Mailing Address 44084 Riverside Pkwy				09 29 2014
			Amoun	
City	State	Zip Code		1000.00
Lansdowne Purpose of Expenditure	VA	20176		tion ID: SE.7230 Disbursement or Obligation
Copy writing		Category/ Type		9 / 29 / 2014
Name of Federal Candidate		Support	Office Sought:	X House District: 04
MIA LOVE		Oppose	Presider	
Calendar Year-To-Date Per Election for Office Sought	.,.,,	40675.00	Disbursement 2014 Oth	For: Primary X General ner (specify) ▶
Full Name of Payee	•		Date of	f Public Distribution/Dissemination
Active Engagement				09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 44084 Riverside Pkwy			Amoun	t
City	State	Zip Code		9600.00
Lansdowne	VA	20176		tion ID : SE.7233 f Disbursement or Obligation
Purpose of Expenditure Online Advertising		Category/ Type		09 / 29 / 2014
Name of Federal Candidate		Support	Office Sought:	: X House District: 04
MIA LOVE		Oppose	Presider	nt Senate State: UT
Calendar Year-To-Date Per Election for Office Sought		50275.00	Disbursement 2014 Oth	For: ☐ Primary ☐ General her (specify) ▶
(a) SUBTOTAL of Itemized Independent Expen	ditures		•	10600.00
(b) SUBTOTAL of Unitemized Independent Exp	penditures		· •	
(a) TOTAL lades and at Farmer library			_	
(c) TOTAL Independent Expenditures			·· •	51275.00
Under penalty of perjury I certify that the indep with, or at the request or suggestion of, any ca party committee) any political party committee of	ndidate or authorized			

[Electronically Filed]

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Date

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